

**UNITED STATES DISTRICT COURT**

**DISTRICT OF OREGON**

**DENNIS JAY WARREN**

**Case No.: 3:16-cv-02077-MC**

**Petitioner.**

**v.**

**ORDER CONDITIONALLY  
APPOINTING PRO BONO COUNSEL  
FOR ALL PURPOSES**

**ODOC – OFFENDER MANAGEMENT AND  
REHABILITATION DIVISION, et al.**

**Respondent.**

\_\_\_\_\_/

The Court hereby grants Dennis Jay Warren's Motion to Appoint Counsel [3] and conditionally appoints Troy Garrett Sexton as counsel of record for all purposes.

Within 14 days of the date of this Order, the appointed attorney/law firm must file the Pro Bono Appointment Response Form with the Court with the appropriate option checked.

If representation is denied due to a conflict of interest or other specified reason, the appointment will be terminated and the Court may appoint substitute counsel.

For more information regarding pro bono forms, procedures, reimbursement of costs, or obtaining a pro bono civil rights mentor attorney, please refer to the Pro Bono Program Procedures document located on the Court's website or contact the Pro Bono Panel Administrator.

**DATED** this 9th day of November, 2016

/s/Michael J. McShane

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Honorable Michael J. McShane  
U.S. District Court Judge

Dennis Jay Warren

**UNITED STATES DISTRICT COURT  
DISTRICT OF OREGON**

**DENNIS JAY WARREN**  
**Petitioner.**

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**v.**

**PRO BONO APPOINTMENT  
RESPONSE FORM**

**ODOC – OFFENDER MANAGEMENT AND  
REHABILITATION DIVISION, et al.**  
**Respondent.**

\_\_\_\_\_/

In response to the Court's Order Appointing Pro Bono Counsel, I hereby certify that:

☐ Representation of Dennis Jay Warren for all purposes is accepted. If appropriate, a Substitution of Counsel will be filed to designate the responsible attorney continuing as counsel of record.

☐ Termination of this appointment is requested based on the following conflict of interest:

\_\_\_\_\_  
\_\_\_\_\_

☐ No conflict of interest exists. However, termination of this appointment is requested for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

**DATED** this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name and Oregon State Bar No.